

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000083442

1. Entity Name

G & M BUILDING ENTERPRISES, INC.

Principal Place of Business

100 ANCHOR DRIVE #112
KEY LARGO FL 33037

Mailing Address

100 ANCHOR DRIVE #112
KEY LARGO FL 33037

2. Principal Place of Business

4 Barracuda Lane
Suite, Apt. #, etc.

3. Mailing Address

24 Dockside Lane #112
Suite, Apt. #, etc.

City & State

Key Largo, FL
Zip 33037 Country

City & State

Key Largo, FL
Zip 33037 Country

4. FEI Number

65-0866583

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

REYNOLDS, LORRAINE F
6412 MELALEUCA LANE
GREENACRES FL 33463

7. Name and Address of New Registered Agent

Name Richard L. Overfield

Street Address (P.O. Box Number is Not Acceptable)

99411 Overseas Hwy #4

City Key Largo

FL

Zip Code 33037

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when reinstating)

DATE

6/11/01

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P
NAME GARGIULO, GEORGE
STREET ADDRESS 157 APACHEE ST
CITY-ST-ZIP TAVERNIER FL 33070 ☐ Delete

TITLE VP
NAME MORRELL, STEVEN
STREET ADDRESS 167 LA PLATO DRIVE
CITY-ST-ZIP DURANGO CO. 81301-8155 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-30-01



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

FILED
Jun 19, 2001 8:00 am
Secretary of State

05-17-2001 91329 049 ***150.00